2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37557

Current Principal Place of Business:

C/O EMERALD COAST ASSOCIATION MANAGEMENT

Name and Address of Current Registered Agent:

10221 EMERALD COAST PARKWAY W

MIRAMAR BEACH, FL 32550 US

US

FEI Number Applied For ()

above, or on an attachment with an address, with all other like empowered.

Electronic Signature of Signing Officer or Director

SIGNATURE: BONNIE WICK

10221 EMERALD COAST PKWY W

MIRAMAR BEACH, FL 32550

Current Mailing Address:

MIRAMAR BEACH, FL 32550

10221 HWY 98 #23

FEI Number: 59-3060000

GELDER, JAY

STE 23

STE 23

FILED Jan 27, 2005 Secretary of State

Certificate of Status Desired ()

New Principal Place of Business:

Name and Address of New Registered Agent:

New Mailing Address:

FEI Number Not Applicable ()

Entity Name: THE COURTYARD AT CRYSTAL BEACH WEST OWNERS' ASSOCIATION, INC.

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete (X) Change () Addition BERNARD, JUDY BERNARD, JUDY Name: Name: 20 VERRETT COURT Address: 20 VERRETT COURT Address: City-St-Zip: KENNER, LA 70065 City-St-Zip: KENNER, LA 70065 Title: PD () Delete Title: VPD (X) Change () Addition Name: O'HARA, NANCY Name: O'HARA, NANCY Address: 90 MARK ST Address: 90 MARK ST City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541 Title: () Delete Title: () Change () Addition RYAN, PAT Name: Name: 260 OLDE POST RD Address: Address: City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: Title: () Delete Title: PD () Change (X) Addition Name: Name: WICK, BONNIE 84 MARK STREET Address: Address: City-St-Zip: City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears

PD

01/27/2005

Date